

Nomination Form for ISPAE elections 2021-2022

PROPOSER

I, Dr _____, life member of ISPAE, would like to propose the name of Dr _____, for the post of _____, of Indian Society of Pediatric and Adolescent Endocrinology (ISPAE).

Signature of Proposer

Address:

Date:

Email:

SECONDER

I, Dr _____, life member of ISPAE, would like to second the name of Dr _____, for the post of _____, of ISPAE.

Signature of Seconder

Address:

Date:

Email:

CANDIDATE

I, Dr _____, life member [membership no ____], ISPAE, agree to the proposal above of my name for the post of _____, of ISPAE.

Signature of Candidate

Address:

Date:

Phone:

Email: